



GAU 2834

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/530,629	
	Filing Date	June 19, 2000	
	First Named Inventor	Michael Dadd	
	Group Art Unit	2834	
	Examiner Name	G. Perez	
Total Number of Pages in This Submission	6	Attorney Docket Number	SHP-PT058

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	C. Frederick Koenig III, Esquire Volpe and Koenig, P.C.	Reg. No. 29,662
Signature		
Date	August 13, 2001	

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Box NON FEE AMENDMENT, Commissioner for Patents, Washington, DC 20231 on this date: August 13, 2001			
Typed or printed name	C. Frederick Koenig III, Esquire		
Signature		Date	August 13, 2001

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Volpe and Koenig, P.C. Revision of

PTO/SB/47 (11-00)

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**FEE TRANSMITTAL
for FY 2001**

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(\$ 0

Complete if Known

AUG 20 2001

Application Number	09/530,629
Filing Date	June 19, 2000
First Named Inventor	Michael Dadd
Examiner Name	G. Perez
Group Art Unit	2834
Attorney Docket No.	SHP-PT058

TC 2800 MAIL ROOM

METHOD OF PAYMENT

- 1.
- ☐
- The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit
Account
Number

22-0493

Deposit
Account
Name

Volpe and Koenig, P.C.

- ☒
- Charge Any Deficiency or Credit any Overpayment in the Total Fees Associated with this Communication

- ☒
- Applicant claims small entity status.
-
- See 37 CFR 1.27

- 2.
- ☐
- Payment Enclosed:

☐ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee Fee Fee Fee Fee Description

Code (\$) Code (\$) Code (\$)

101 710 201 355 Utility filing fee

106 320 206 160 Design filing fee

107 490 207 245 Plant filing fee

108 710 208 355 Reissue filing fee

114 150 214 75 Provisional filing fee

Fee Paid

SUBTOTAL (1) (\$ 0

2. EXTRA CLAIM FEES

Total Claims	16	-	20	**	0	x	9	=	0
Independent Claims	1	-	3	**	0	x	40	=	0
Multiple Dependent							0	=	0

Large Entity Small Entity

Fee Fee Fee Fee Fee Description

Code (\$) Code (\$) Code (\$)

103 18 203 9 Claims in excess of 20

102 80 202 40 Independent claims in excess of 3

104 270 204 135 Multiple dependent claim, if not paid

109 80 209 40 ** Reissue independent claims over original patent

110 18 210 9 ** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 0

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code	Small Entity Fee Code	Fee Description	Fee Paid
105 130	205 65	Surcharge - late filing fee or oath	
127 50	227 25	Surcharge - late provisional filing fee or cover sheet	
139 130	139 130	Non-English specification	
147 2,520	147 2,520	For filing a request for <i>ex parte</i> reexamination	
112 920*	112 920*	Requesting publication of SIR prior to Examiner action	
113 1,840*	113 1,840*	Requesting publication of SIR after Examiner action	
115 110	215 55	Extension for reply within first month	
116 390	216 195	Extension for reply within second month	
117 890	217 445	Extension for reply within third month	
118 1,390	218 695	Extension for reply within fourth month	
128 1,890	228 945	Extension for reply within fifth month	
119 310	219 155	Notice of Appeal	
120 310	220 155	Filing a brief in support of an appeal	
121 270	221 135	Request for oral hearing	
138 1,510	138 1,510	Petition to institute a public use proceeding	
140 110	240 55	Petition to revive - unavoidable	
141 1,240	241 620	Petition to revive - unintentional	
142 1,240	242 620	Utility issue fee (or reissue)	
143 440	243 220	Design issue fee	
144 600	244 300	Plant issue fee	
122 130	122 130	Petitions to the Commissioner	
123 50	123 50	Processing fee under 37 CFR 1.17(q)	
126 180	126 180	Submission of Information Disclosure Stmt	
581 40	581 40	Recording each patent assignment per property (times number of properties)	
146 710	246 355	Filing a submission after final rejection (37 CFR § 1.129(a))	
149 710	249 355	For each additional invention to be examined (37 CFR § 1.129(b))	
179 710	279 355	Request for Continued Examination (RCE)	
169 900	169 900	Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 195.00

SUBMITTED BY

Name (Print/Type) C. Frederick Koenig III, Esquire

Registration No.
(Attorney/Agent)

29,662

Complete (if applicable)

Telephone 215-568-6400

Signature

Date August 13, 2001

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